NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

Please read the instruction before completing. Attach additional sheets if necessary. DEC 14 2009

COMMISSION ON ETHICS

PERSONAL INFORMATION:		···			o					
NAME: - Frances Harrington		LENG	TH OF RESID	DENCE IN NEV	/ADA: 👒	<u> 36</u>	4 15			
	Mille	<u>- L</u>	Jn. # 1-	15						
CITY, STATE, ZIP: ( r. liente NV. 89008			LENGTH OF RESIDENCE IN DISTRICT 25/2 4rs							
TELEPHONE: (775) 726-3466			E-MAIL: X							
SECTION A (Public Office): List all public offices for which this and check each box accordingly i.e. annual, candidate or appo	i financial di pintment filir	isclo ng. N	sure statem IRS 281A.6	ent is require 20.1(g).	ed					
Till (D. I.) Office and News of Consumment	e e	(E, A, AE)	Annual Compensation	Date elected or appointed	ANNUAL NRS 281A.600.1 &	Z81A.610.1 CANDIDATE NRS 281A.610.1(a).	APPOINTMENT NRS 281A.600.1			
Title of Public Office and Name of Government	0				Check to	ne appropriate	boxes below			
LINCOLN COUNTY TV BOARD	V	\$ \$	575	6/09						
20,70-07-1-00-1-00-1-00-1-00-1-00-1-00-1-		\$					_			
		\$								
SECTION B (Sources of Income): List each source of your inc any member of your household who is 18 years of age or olde	come (in ad er. NRS281.	ditio A.62	n to any sou 0.1(b).	rce listed in	Section		at of Household Member			
							e appropriate s below			
PERS						V				
SOCIAL SECURITY						/				
SECTION C (Real Property): List specific location and particular which you or a member of your household has a legal or beneficier; and (3) located in this state or an adjacent state. NRS 2 Specific Location	eficial intere	est; (	al estate (otl 2) the fair m	ner than pers arket value o <u>Particula</u>	ot which	sidence): is \$2,50	(1) in 0 or			
NUNE										
							<u></u>			

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COMMISSION ON ETHICS

PERSONAL INFORMATION:		····			. <u>.</u>		
NAME: NAME V Cloeckner	l	ENGTH	OF RESI	DENCE IN NEV	ADA:	46	gu
ADDRESS: p0130x 245 No 6 Com	pay	Ko	w	SELICE IN BIO	PIOT		
CITY, STATE, ZIP: PALIENTON 89008				DENCE IN DIST RED TO VOTE		46	y-
TELEPHONE: 975-726321'C		E-MAIL: None					
SECTION A (Public Office): List all public offices for which this fi and check each box accordingly i.e. annual, candidate or appoin	nancial di itment filir	sclosure g. NRS	statem 281A.6	ent is require 20.1(g).	d		
	Elected, appointed or appointed or appointed fo elected	(-1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	Annual Compensation	Date elected or appointed	<b>ANNUAL</b> NRS 281A.600.1 & 281A.610.1	<b>CANDIDATE</b> NRS 281A.610.1(a).	APPOINTMENT NRS 281A.600.1
Title of Public Office and Name of Government	5			Check the	eck the appropriate boxes below		
Lincohn County TU BOARd MEMA	ec X	127	<u>00</u>	1/09-			
CTHEORY COOK & TO DEATH THE		<b>5</b>		-		-	
		\$					
SECTION B (Sources of Income): List each source of your income any member of your household who is 18 years of age or older.	me (in add NRS281/	dition to A.620.1(	any sou b).	rce listed in S		F	t of lousehold Member
							appropriate below
RAILBOAD RETIREPPE	7.	<del>5</del> 5	OCIA	1500	RITU	X	1 <del>4</del>
Lincoln County TO DISTA	cict					<i>X</i>	
							<u></u>
SECTION C (Real Property): List specific location and particula which you or a member of your household has a legal or benefit more; and (3) located in this state or an adjacent state. NRS 28  Specific Location	cial intere	st; (2) th	state (ot ne fair m	ner than pers arket value o <u>Particular</u>	t which is	dence): \$2,500	(1) in or
None							